

THE
ANNUAL REPORT

FOR THE YEAR 1905,

OF THE
MEDICAL OFFICER OF HEALTH

TO THE
Rural District Council of Melton Mowbray

BY
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WHALLEY AND JENNER, PRINTERS, MELTON.



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To the Rural District Council of Melton Mowbray.

GENTLEMEN,

I have the honour to lay before you my twenty-fourth Annual Report on the Rural District of Melton Mowbray.

During 1905 the number of births was 338, including 188 boys and 150 girls, which gave a birth-rate of 21.8 per 1000 of the population per annum; 30 infants died before attaining the age of one year, equal to a mortality of 88.7 per 1000 children born. During the ten years 1895 to 1904 the average number of births was 391, or 26.6 per 1000 per annum of the population; and the average number of deaths of infants under one year was 40; therefore not only the birth-rate but the infantile mortality of 1905 was below the average, indeed they have been declining for several years.

The deaths in 1905 were 201, and the death-rate was 13.0 per 1000; this is again somewhat below the average of the last ten years, which was 13.8 per 1000, but it is not quite so low as in the years 1902 (12.4) and 1903 (12.6) per 1000.

The population of the district which was 14,865 when the census was taken in 1901, was estimated as being 15,426 in June last. The natural increase of population in your district is about 200 a year;

but for various reasons the actual increase does not exceed half that amount, the chief one being the removal of people from the country to the towns; and until some practical measure is adopted by which persons may be induced to live upon the land, or until they gain some of the advantages which are possessed by towns-people the depopulation of the country districts will continue. Table I which is appended gives the population estimated to the middle of each year from 1895 down to present time, also the births and birth-rate, the amount and rate of infantile mortality, the total deaths and death-rate; and the average of the same for ten years, 1895 to 1904. Table II also deals with the same statistics.

TABLE IV.—THE CAUSES OF DEATH.

Of the 201 deaths recorded, 30 were infants under one year; 16 from 1 to 5 years; 11 from 5 to 15; 2 from 15 to 25; only 51 deaths occurred in the important period of life from 25 to 65 years of age, comprising more than half the average life of people who survive infancy; and 91 deaths at ages above 65, including 35 from 75 to 85 years of age, and 12 over 85 years of age.

The causes of death were as follows: Scarlet fever 2, diphtheria 6, influenza 5, diarrhoea 1, erysipelas 1, consumption or pulmonary tuberculosis 14 over 25 years, other tubercular diseases 7, *i.e.* 5 in children and 2 over 25 years of age; cancer 20, all over 45 years; bronchitis 8, pneumonia 12, pleurisy 1, cirrhosis of liver 1, premature births 3, accidents at birth 1, heart disease 18, all but one of whom were adults; all other diseases 93, including 21 under 5 years and 55 over 65 years of age. Deaths from suicide 0; from accident 8 as follows: 2 children by scalding, 1 by iron weight falling upon him, 2 by being thrown from a cart, 1 by horse falling upon him, 1 by fall from a window, and 1 by a steam roller passing over him.

Table V deals more fully with the infantile mortality: there were 30 deaths under one year; 9 in first, 2 in second, and 2 in the third week; 2 in the second month, 2 in the third, 1 in fourth, 2 in fifth, 2 in sixth, 4 in seventh, 1 in ninth, 2 in tenth, and 1 in the eleventh. The causes of death were, diarrhoea 1, gastro-intestinal catarrh 1, premature birth 3, injury at birth 2, want of breast milk 2, atrophy debility and marasmus 6, tubercular meningitis 2, tubercular peritonitis 1, erysipelas 1, convulsions 5, bronchitis 1, pneumonia 2, other causes 3, total 30.

TABLE III.—THE OUTBREAK OF EPIDEMIC DISEASES.

During the year 141 cases of infectious diseases were notified to me, including 26 diphtheria, 9 erysipelas, 73 scarlet fever, 1 enteric

fever, and 32 chicken pox ; the deaths were 6 from diphtheria, two from scarlet fever, and one from erysipelas.

Diphtheria was very prevalent in some parishes in 1904, and continued in odd mild cases throughout the winter of 1905. There was a case at Goadby Marwood in January, another at Eastwell in February, Long Clawson had four in March, Stathern had a case in April, May. and July, Hose 3 cases in May, Stapleford a fatal case in August, Eastwell a second case in August, Somerby had 7 cases from August to November, Cold Overton 2 in October, Harby 2 in November, and Scalford a fatal case in November. In some villages the outbreak was a recrudescence of the epidemic of the previous year, and in others the disease was clearly traced to transmission by persons or goods from within or without the district.

Scarlet Fever 73 cases, 3 deaths. One or two cases occurred at Harby, Hoby, Kirby, Garthorpe, Branstone, Eastwell, Twyford, Knossington ; but the places chiefly affected were Stathern, Asfordby and Somerby.

At Stathern the main outbreak occurred from July to September, and there was a total of 19 cases. There had been several mild cases which escaped attention before those notified to me in July. No special cause of the outbreak could be found beyond the ever-recurring nuisance from the pigs at Mr. Morris' and the defective drainage, which have been so often brought to your notice.

At Somerby there were 23 cases, the first of which was notified on March 18th, enquiries made during my visit to the village elicited the fact that "sore throat with vomiting and feverish symptoms" had been common in the village for several weeks prior to this. Several genuine cases of scarlet fever were not notified and the children were running the streets until their parents were threatened with prosecution. The school was closed for one month from March 31st, and the school premises ordered to be disinfected and lime-washed. At Asfordby twelve cases occurred during the year ; the disease was never prevalent, but the village was never free from it during the whole year.

There were 32 cases of *Chicken Pox* scattered over 14 parishes; the highest number being 6 in one family at Chadwell ; the others were at Asfordby, Kirby, Ashby Folville, Barsby, Leesthorpe, Somerby, Scalford, Abb-Kettleby, Hose, Harby, Stathern, Eaton, Sproxton.

The other prevalent infectious diseases were *Measles* at Old Dalby, Hoby, Waltham, &c. ; the school was closed at Hoby on this account for three weeks in June and July ; and at Long Clawson

from October 21st to November 20th. *Whooping Cough* was prevalent in the autumn at Asfordby, Burton Lazars, Scalford, Waltham, Branstone, and Buckminster, owing to which the schools were closed at Burton Lazars from December 22nd to January 15th, and at Scalford from October 28th to November 27th.

GENERAL REMARKS :—A very large number of the cases of infectious diseases recorded were of a mild character, but being mild they were none the less infectious. Isolation of the patient was adopted wherever that was possible, for it is a difficult matter to isolate a person in a family of 6 or 8 people when there are only 2 or 3 bedrooms; nevertheless it was carried out very satisfactorily in some cases and the spread of the disease thereby checked. In all cases disinfectants were used during the course of the disease, and afterwards the rooms were fumigated with sulphur or formalin, the clothes and bedding disinfected as well as possible and a thorough cleaning of the house recommended. With respect to isolation, there should be no difficulty in the future because the Isolation Hospital at Melton was opened in the Autumn and will make provision for those who cannot be isolated at home. Such an institution ought to be the means of reducing even if it does not wipe out such diseases as diphtheria, scarlet fever, &c. But it is useless to isolate some of the patients if others go free, indeed our vigilance on this score must not be relaxed; there has for years been a tendency on the part of parents not to notify or get medical attendance for mild cases of these diseases or they go unrecognised, and the infected person is soon at school again, or running the streets, or following his ordinary avocation. I have many times detected these persons in a state of desquamation. Nor must the benefits to be derived from the disinfection of houses, bedding, clothing, &c. be neglected; on the contrary, our hands ought to be strengthened so that a more thorough disinfection may be carried out than has hitherto been done. In many cases *e.g.* the mother of the family has nursed a sick child and conscientiously carried out the instructions given her with regard to isolation and washing bed-clothing, but she has probably forgotten that her own clothing has become infected during her nursing, that carpets and various articles left in the chests of drawers or boxes in the room have also become infected, and no special precaution is taken with regard to them. Now, every article which has been, perhaps not used at all by the sick person in the sick room or in a drawer or box in that room becomes infected; I have known such things to remain undisturbed for months, and when such an article is used, it may be months or a year or two after the original illness, a fresh outbreak of the disease occurs. This is one of our weak points, viz: want of thorough disinfection of the house and everything in it, and more

particularly of the persons and things which have been in the sick room. It is useless to stove or spray a sick room with disinfectants and whitewash the walls, if articles of wearing apparel, carpets, &c. which have been left in the room go without being disinfected. As soon as ever an infection case is known to exist, all unnecessary furniture, curtains, carpets, clothing, drawers, boxes, &c., should be removed from the room; the attendants should only wear washable clothing, and if they go out of the room they should change their garments before coming in contact with other people; only such toys and books should be allowed in the room as can afterwards be destroyed. If the case has not been recognised for several days every article in the room, no matter what its nature or composition, ought to be disinfected as thoroughly as if they had remained in the room, during the entire illness; there is no other way to stamp out such diseases! Isolation of the patient is decidedly the proper thing for he is the source of the infection; but it is useless to isolate the patient and omit the thorough disinfection of everything that has been within the sphere of his influence. Whatever article can be boiled ought to be boiled; what cannot be boiled must be soaked in a solution of carbolic acid or other disinfectant of sufficient strength to destroy the microbes; and all solid articles of furniture, the doors, windows and window frames, the floors &c. must be thoroughly cleaned with such a disinfectant. In the case of floors, the cracks or crevices between the boards or in the plaster are a special source of danger; these are a favourite breeding ground for flies, fleas, and other insects, and unless they are thoroughly freed from dust and dirt and cleansed with a disinfectant they will assuredly store a reserve of the microbes of any infectious disease which has run its course in that room. The paper should never be allowed to remain on the walls of such a room, for disease microbes have many times been obtained from such paper; and the ceiling should be scraped and lime-washed; where the walls have been "washed" the previous coat should be removed by scraping or otherwise cleansing it before white or colour washing. Our Inspector always sprays the bedrooms with formalin or stoves them with sulphur, but this is not held out as being all that is necessary.

It is unfortunate that the Council does not possess a proper disinfecting stove for the purpose of disinfecting bedding, mattresses and other unwashable articles. This is an important matter. The microbes of a disease can—and probably always do affect the bed and mattress slept on by an infected person; and one cannot be sure that sulphur or formalin will penetrate such articles and destroy the microbes in the time which they are exposed to them. On the other hand, all disease germs may be destroyed by a proper degree of heat; but this can only be applied in a suitable manner by a proper apparatus. I have frequently mentioned the need for

this in my Annual and other reports; and I now desire to emphasise the necessity for it, so that the work of disinfection and isolation may go on hand in hand, that we may attain the object for which the Hospital was designed. I trust, therefore, that you will consider the advisability of purchasing such a disinfecting apparatus as is suitable for the purpose indicated.

THE SANITARY WORK.

Twenty villages were inspected by me during the year; including Somerby three times, Long Clawson twice, Asfordby thrice, Hose twice, and Stathern four times. A house to house inspection was made of nearly every one; with the result that many filthy accumulations were removed, and nuisances abated, drains and water examined, drainage and sewers repaired, wells cleaned out, and other sanitary work done.

The Sanitary Inspector's Report includes: Premises, houses, etc., inspected 700, nuisances abated 55; privies, ditches, cesspools, ashpits inspected 300, nuisances abated 30; drains, etc., inspected 130, nuisances abated 25; offensive accumulations inspected and removed 30; all sewer dykes and tanks inspected, and cleaned out where necessary. Number of slaughter houses 50, inspected 25. Number of cow-keepers, dairymen, purveyors of milk in the district, about 400; number of premises inspected included in first item. Infectious diseases: houses infected and inspected twice each, 95; houses disinfected, 35 with formalin and carbolic acid supplied to all who desired it; clothing disinfected 3 lots, destroyed 2 lots. New privy middens provided 3; repaired 6, converted to pails 20, to W.C.'s 2; new pail closets provided 15, new ashpits 5. Water analysed 1, condemned 1; wells cleaned and repaired 7. New sewers and drainage laid: Long Clawson 114 yards, Wymondham 270, Nether Broughton 30, Saxby 25 yards. Building Bye-Laws: 29 plans of new buildings were submitted to and passed by the Council. The new sewerage scheme for Stathern is in progress.

There was a case of Anthrax at Eaton, in November, and at Wymondham in December. The carcass of the animals was destroyed and the premises disinfected.

FACTORY AND WORKSHOPS ACTS, 1901: Number of Workshops in the District, including bakehouses 39, bakehouses 32, nuisances abated 2. Home work: The outworkers number 170 in 150 houses; houses infected and disinfected 6; several lots of veiling were destroyed from infected houses.

LINE OF PROGRESS: The persistence in attention to Drainage,

water and disinfection. The purchase of a proper disinfecting store. Obtaining a proper water supply to houses where it is absent or defective. The recrudescence of diphtheria at Long Clawson and Hose accentuates the necessity for proper attention to the sewerage in these places; in both parishes there are open sewer dykes, which become foul, and are known to have been certainly connected with outbreaks of the disease; in one fatal case the child had to pass a foul dyke twenty-times a week in going to and from School.

THE METEOROLOGICAL REPORT of Dr. J. T. Tibbles is appended: It shows the amount of rainfall, the degree of temperature, and state of barometer, at Melton Mowbray during each month of the year. It has to be recorded, as in 1904, that the rainfall was low, the temperature very changeable, but the extremes of cold and heat were rare and only of short duration; the water supply of many villages was short, water courses ran dry, sewer dykes became unusually offensive in consequence, and sore throats, diphtheria, etc., were common, although the amount of dangerous illness never ran high, nor was the death-rate at any time above the average.

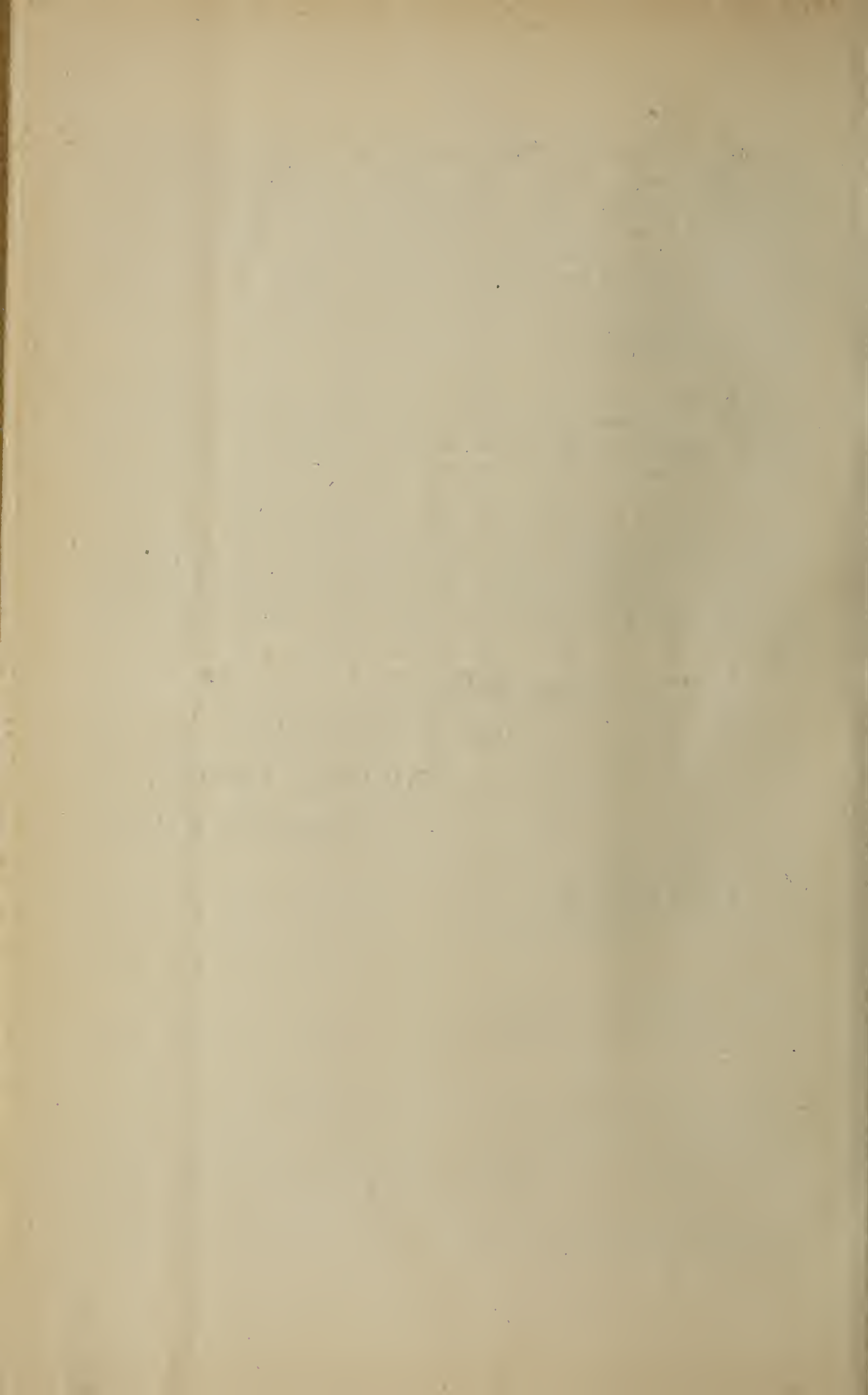
I am, Gentlemen,

Your obedient Servant,

WILLIAM TIBBLES,

Medical Officer of Health.

January 24th, 1906.
4, The Ropewalk,
Nottingham.



METEOROLOGICAL REPORT FOR YEAR 1905.

By JOHN T. TIBBLES, M.R.C.S., Eng., F.R. Met. Soc., Melton Mowbray.

BAROMETER REDUCED TO SEA LEVEL & 32 deg. FAHR.					TEMPERATURE.									Mean Cloud at 9 a.m.	RAINFALL.		
Mean of Month.	Highest.	Date.	Lowest.	Date.	MEANS.					EXTREMES.					Fall in inches Total.	No. of Days on which Rain fell.	Greatest fall and Date.
					9 a.m.	Max.	Min.	Range.	Mean.	Max.	Date.	Min.	Date.				
JANUARY 30.183	30.813	27th	29.165	17th	35 ⁰ 2	41 ⁰ 1	29 ⁰ 0	12 ⁰ 1	32 ⁰ 0	51 ⁰	6th	15 ⁰	20th	6.5	0.93	14	0.21 on 8th
FEBRUARY 30.202	30.407	12th	29.028	27th	39 ⁰ 1	44 ⁰ 9	31 ⁰ 7	13 ⁰ 2	38 ⁰ 3	54 ⁰	18th	20 ⁰	8th	7.2	0.85	14	0.17 on 13th
MARCH 29.671	30.250	3rd	28.888	15th	43 ⁰ 2	51 ⁰ 1	33 ⁰ 7	17 ⁰ 4	42 ⁰ 4	59 ⁰	22nd	26 ⁰	3rd	6.7	2.69	23	0.40 on 10th
APRIL 29.820	30.095	2nd	29.402	29th	45 ⁰ 9	54 ⁰ 7	35 ⁰ 9	18 ⁰ 8	45 ⁰ 3	65 ⁰	12th	25 ⁰	7th	7.3	1.96	22	0.29 on 5th
MAY 30.072	30.452	5th	29.256	1st	53 ⁰ 6	61 ⁰ 4	37 ⁰ 3	24 ⁰ 1	49 ⁰ 3	75 ⁰	28th	27 ⁰	6th	6.6	0.35	8	0.21 on 1st
JUNE 29.925	30.375	23rd	29.675	29th	60 ⁰ 3	71 ⁰ 6	49 ⁰ 9	21 ⁰ 7	60 ⁰ 7	81 ⁰	27th	38 ⁰	5th	7.1	4.04	14	1.77 on 17th
JULY 30.005	30.220	18th	29.841	1st	68 ⁰ 4	77 ⁰ 9	51 ⁰ 2	26 ⁰ 7	64 ⁰ 5	82 ⁰	14th	41 ⁰	7th	6.1	1.33	8	0.71 on 26th
AUGUST.....29.832	30.212	13th	29.283	29th	60 ⁰ 7	67 ⁰ 1	46 ⁰ 6	20 ⁰ 5	56 ⁰ 8	79 ⁰	14th	36 ⁰	24th	7.2	3.16	18	0.45 on 18th
SEPTEMBER 29.938	30.325	15th	29.465	10th	55 ⁰ 9	57 ⁰ 9	42 ⁰ 5	15 ⁰ 4	50 ⁰ 2	71 ⁰	4th	30 ⁰	15th	7.0	2.46	12	0.93 on 25th
OCTOBER 30.084	30.464	11th	29.197	31st	44 ⁰ 2	50 ⁰ 1	34 ⁰ 7	15 ⁰ 4	42 ⁰ 4	60 ⁰	9th	23 ⁰	17th	5.9	1.21	18	0.29 on 4th
NOVEMBER 29.795	30.253	18th	29.067	26th	39 ⁰ 1	45 ⁰ 0	31 ⁰ 0	14 ⁰ 0	38 ⁰ 0	53 ⁰	26th	22 ⁰	20th	7.4	2.76	17	0.71 on 10th
DECEMBER 30.187	30.785	12th	29.273	29th	36 ⁰ 9	42 ⁰ 7	30 ⁰ 9	11 ⁰ 8	36 ⁰ 8	54 ⁰	7th	25 ⁰	4th	7.2	0.84	14	0.30 on 28th

Total inches—22.58 on 182 Days.

